KHSAA Form GE69



KENTUCKY HIGH SCHOOL ATHLETIC ASSOCIATION WAIVER OF 15-DAY TIME PERIOD TO FILE EXCEPTIONS TO HEARING OFFICER RECOMMENDATIONS

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In Re:		
Hearing Date:		
Order Date:		
Deadline for Waiver:		
Hearing Body:		
the recommendations of the Hearing Officer.	te the recommended order is mailed within whi See KRS 13B.110(4) and KHSAA Due Process rocedural right conferred upon that person by I	s Procedure Paragraph
file exceptions, please do so within the 15 da 15 day time period, please check the approprime period, please check the appropriate I athlete/parent, 2) the sending school or 3) reconstructions.	ow for a more timely Final Ruling by the Commys. However, if you do not wish to file exception triate AGREE box below. If you DO NOT AGRED DO NOT AGREE box below. If any one party ceiving school does not agree to waive the 15 commissioner will expired.	ns, or want to waive the EE to waive the 15 day r, either the 1) student lay time period for filing
(Check one) Please sign and return this wa	iver form to the KHSAA before the deadline da	te listed above.
AGREE - WAIVE 15 DAY PERIOD -	NO EXCEPTIONS TO BE FILED - I express	y waive the fifteen (15)
day time period to file exceptions, and I have AGREE – WAIVE 15 DAY PERIOD - E	e no exceptions to file. EXCEPTIONS ENCLOSED - I expressly waive t	he fifteen (15) day time
period to file exceptions, and have enclosed	all the exceptions I wish to file in this case.	
DO NOT AGREE — I do not agree to v	vaive the right to file exceptions within the fiftee	en (15) day time period.
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Print Name & Title	Signature	Date